

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 6	
1. CONTRACT PURCH ORDER/AGREEMENT NO. <div>DAAE07-00-D-M001</div>			2. DELIVERY ORDER/CALL NO. <div>0204</div>		3. DATE OF ORDER/CALL (YYYYMMDD) <div>2003MAR07</div>		4. REQUISITION/PURCH REQUEST NO. <div>SEE SCHEDULE</div>		5. PRIORITY <div>DOA4</div>		
6. ISSUED BY TACOM AMSTA-AQ-ALEC BRIAN CORRIGAN (586) 574-8227 WARREN, MICHIGAN 48397-5000 EMAIL: CORRIGANB@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			CODE <div>W56HZV</div>		7. ADMINISTERED BY (If other than 6) DCMA BIRMINGHAM BURGER PHILLIPS CENTER 1910 THIRD AVE. NORTH, RM 201 BIRMINGHAM, AL 35203-2376			CODE <div>S0101A</div>		8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)	
9. CONTRACTOR C NONE HQ0338 NAME AND ADDRESS CAMBER CORPORATION 635 DISCOVERY DRIVE HUNTSVILLE, AL 35806 TYPE BUSINESS: Large Business Performing in U.S.			CODE <div>OMWW4</div>		FACILITY		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE		11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED		
14. SHIP TO SEE SCHEDULE			CODE		15. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264			CODE <div>HQ0338</div>		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER		DELIVERY/ CALL <input checked="" type="checkbox"/>		THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.							
PURCHASE				Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____.							
				furnish the following on terms specified herein.							
				ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.							
<div style="display: flex; justify-content: space-between;"> <div>NAME OF CONTRACTOR</div> <div>SIGNATURE</div> <div>TYPED NAME AND TITLE</div> <div>DATE SIGNED (YYYYMMDD)</div> </div> <div><input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:</div>											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE											
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE			20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE CONTRACT TYPE: Cost-Plus-Fixed-Fee KIND OF CONTRACT: System Acquisition Contracts									
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. UNITED STATES OF AMERICA DENNIS OROSZ /SIGNED/ (586) 574-7250 OROSZD@TACOM.ARMY.MIL BY: _____ CONTRACTING/ORDERING OFFICER					25. TOTAL \$200,650.16	
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED											
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO.		29. D.O. VOUCHER NO.		30. INITIALS		
f. TELEPHONE NUMBER					g. E-MAIL ADDRESS		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.					31. PAYMENT				34. CHECK NUMBER		
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER			31. PAYMENT				35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.	

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE07-00-D-M001/0204 MOD/AMD	Page 2 of 6
Name of Offeror or Contractor: CAMBER CORPORATION		

SUPPLEMENTAL INFORMATION

PROGRAM:	OMNIBUS PROGRAM & ENGINEERING SUPPORT SERVICES
CONTRACT:	DAAE07-00-D-M001/0204 OPT YR 4
PURPOSE OF ORDER:	EXERCISE OPTION YR 4 FOR 4,088 HOURS
CURRENT AMOUNT:	\$.00
THIS CHANGE	\$200,650.16
TOTAL AMOUNT	\$200,650.16

1. This action is Task Order number 0204 issued pursuant to Contract DAAE07-00-D-M001.
2. The purpose of this order is to exercise option for 4,088 hours pursuant to Special Provisions H.1.4. This order will provide on-site logistics management support at Ft Hood Texas for PM Abrams/PM Bradley.
3. This is a unilateral order for 4,088 man-hours of level of effort, awarded on Cost Plus Fixed Fee basis in the amount of \$200,650.16. This includes \$181,681.84 cost and \$18,968.32 fixed fee.
4. The Contractor shall perform this order 0204 in accordance with the Scope of Work in Section C and Work Directive CAM-204.
5. The period of performance is date of award through 28 Feb 04.

6. PAYMENT

The contractor shall submit monthly invoices for payment for work performed in the previous month.

7. INVOICE INSTRUCTIONS

In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract. On each billing document prepared by the contractor, the CLIN/SUBCLIN applicable to that billing shall be specified. Where there is one ACRN applicable to the particular CLIN/SUB/CLIN being billed, the ACRN shall be specified as well.

8. PAYMENT INSTRUCTIONS FOR DFAS

- a. In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract.
- b. The paying office shall pay each invoice only with the funds obligated under the CLIN/SUBCLIN specified on the voucher. Payments shall be made first from the oldest funds by fiscal year applicable to each individual CLIN. The oldest funds shall be disbursed in their entirety before proceeding to disburse the next ACRN.

Name of Offeror or Contractor: CAMBER CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT									
	SUPPLIES OR SERVICES AND PRICES/COSTS													
0001	SECURITY CLASS: Unclassified													
0001AA	<div>SERVICES LINE ITEM</div> <div>NOUN: LOG MGMT SPT AT FT HOOD PRON: 473TPU0447 PRON AMD: 02 ACRN: AA AMS CD: 31206500022 NOUN: To provide on-site logistics management support at Ft Hood Texas. Level of Effort: 4,088 man-hours WD: CAM-204 Estimated Cost: \$181,681.84 Fixed Fee: 18,968.32 Total Estimated Cost: \$200,650.16 <div>(End of narrative B001)</div> <div>Inspection and Acceptance</div><div>INSPECTION: Destination ACCEPTANCE: Destination</div> <div>Deliveries or Performance</div><table><tr><td>DLVR SCH</td><td></td><td>PERF COMPL</td></tr><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>28-FEB-2004</td></tr></table><div>\$ 100,325.08</div></div>	DLVR SCH		PERF COMPL	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	28-FEB-2004				\$ 100,325.08
DLVR SCH		PERF COMPL												
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>												
001	0	28-FEB-2004												
0001AB	<div>SERVICES LINE ITEM</div> <div>NOUN: CAMBER SUPPORT TO FORT HOOD PRON: 7226F50972 PRON AMD: 01 ACRN: AB AMS CD: 31102897002 NOUN: To provide on-site logistics management support at Ft Hood Teas for PM Abrams and PM Bradley Funding Support for Clin 0001AA WD: CAM-204</div>				\$ 100,325.08									

Name of Offeror or Contractor: CAMBER CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT						
	<div>(End of narrative B001)</div> <div><u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination</div> <div><u>Deliveries or Performance</u> DLVR SCH PERF COMPL <table><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>28-FEB-2004</td></tr></table><div>\$ 100,325.08</div></div>	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	28-FEB-2004				
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DELIVERIES OR PERFORMANCE

F.1 Period of Performance

Period of performance for the work set forth in WD CAM-204 is date of award thru 28 Feb 04.

*** END OF NARRATIVE F 001 ***

CONTINUATION SHEET**Reference No. of Document Being Continued**

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PIIN/SIIN DAAE07-00-D-M001/0204

MOD/AMD

Name of Offeror or Contractor: CAMBER CORPORATION

CONTRACT ADMINISTRATION DATA

LINE	PRON /	OBLG				JOB			
ITEM	AMS CD	ACRN	STAT	<u>ACCOUNTING CLASSIFICATION</u>		ORDER NUMBER	<u>ACCOUNTING STATION</u>		<u>OBLIGATED AMOUNT</u>
0001AA	473TPU0447	AA	2	21	32033000035R5R02P3120652512	S20113	3ZGATP	W56HZV \$	100,325.08
	31206500022								
0001AB	7226F50972	AB	2	21	22033000025R5R03P31102831E9	S20113	2ZGBGF	W56HZV \$	100,325.08
	31102897002								
								TOTAL \$	200,650.16

SERVICE						ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>
Army	AA	21	32033000035R5R02P3120652512	S20113		W56HZV	\$ 100,325.08
Army	AB	21	22033000025R5R03P31102831E9	S20113		W56HZV	\$ <u>100,325.08</u>
						TOTAL	\$ 200,650.16